

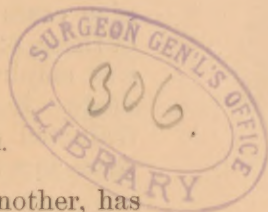
JACKSON, (G. T.)

ICHTHYOL AND RESORCIN. A CLINICAL STUDY OF THEIR EFFECTS.¹

BY

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FROM time to time, now one remedy and now another, has been introduced to the notice of the medical profession, and commended enthusiastically as almost a specific for certain diseases. For a few brief months the enthusiasm seems almost contagious; the medical journals bristle with articles from Doctors A., B., and C., proclaiming the wonderful cures they have obtained by the new remedy. But wait! A few months pass; the reports about the drug grow less, and, like a sputtering candle, the great new light goes out, while the glow from the old and well-tried remedies becomes brighter than ever.

No remedy in my time has been more enthusiastically heralded than *ichthyol*. Fired by the enthusiasm of Unna as evinced in the *Ergänzungsheft* II. to the *Monatshefte f. prakt. Dermatologie*, for 1886, I began a series of practical experiments upon the ambulant patients in the service of Dr. George Henry Fox, at the New York Skin and Cancer Hospital, the results of which are given in this paper. I was predisposed in favor of the drug, and was therefore disappointed the more with the results obtained. The preparation used in nearly all the cases was the ammonio-sulphate, as manufactured by the Hamburg Ichthyol Company, and imported by Messrs. J. White & Co., of this city, who kindly furnished the hospital with a liberal supply for purposes of experiment. To them I would express my thanks for their courtesy. This preparation was used because it was the one preferred by Unna; and it must be understood to be indicated in the following report, excepting where otherwise noted. In order to test the value of the drug itself, it was ordered in vaseline or simple ointment, and unless otherwise indicated, such excipients are to be understood. Its use was continued in each case for about one month, or until I became convinced that it was producing no benefit, or I could no

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longer withstand the appeals of my patients to stop it. With these preliminary remarks, let us proceed to a study of my cases.

I used the drug in thirty cases, as follows: Rosacea, six cases; eczema, eight cases; recurrent erythema, one case; acne, nine cases; sycosis, one case; and ulcers, five cases. In some of these, other plans of treatment had been used before ichthyol was employed, and to some, ichthyol was the first application made. Eight of the cases failed to return, and these being deducted from the total number, leaves twenty-two cases to serve as a text.

1. ROSACEA.

Of these I was able to follow only three cases.

CASE 1.—Mary S—, M., æt. 39. Rosacea of one and one-half year's standing.

June 17, 1886. Ordered a 10 per cent. solution of ichthyol (pure) in water.

July 15th. Face somewhat paler. Continue treatment.

July 31st. Face much redder, and skin inflamed. Stop ichthyol.

CASE 2.—Annie R—, machine operator, æt. 36. Rosacea with acne for one year.

June 29, 1886. Ichthyol, 5 per cent, in collodion, locally, and three drops in capsule in the morning, internally.

July 10th. Doing well. Continue treatment.

September 28th. No improvement. Stop the drug and give lotio alba, which rapidly cleared the face.

CASE 3.—Lizzie R—, M., æt. 28. Rosacea with acne for six months. August 12, 1886, ichthyol soap locally, and ichthyol in capsules internally, 3 drops A. M. and P. M.

August 19th. Face smoother, but red; continue treatment.

August 26th. Face red and sore. Bowels very loose. Continue the soap, but stop the capsules.

September 2d. Face not so red, but more acne. Continue the treatment.

September 9th. Face no better. Stop ichthyol.

2. ECZEMA.

I was able to follow all eight of these cases.

CASE 4.—Bridget H—, M., æt. 52. Eczema squamosum of many years' standing. A very chronic and obstinate case, with a great deal of thickening of the skin.

June 16, 1886. Prescribed a 10 per cent. ointment of ichthyol.

June 22d. Doing well. Continue ointment.

June 26th. About the same. Continue the ointment and order 3 drops of the ichthyol A. M. and P. M.

June 29th. Somewhat improved. Continue treatment.

July 8th. Feet swollen, raw and very painful, so that the patient can scarcely walk. Stop ichthyol.

CASE 5.—David S—, æt. 7 mos. Eczema vesiculosum in small patches.

June 26, 1886, order 5 per cent. ichthyol ointment and 3 drops of the ichthyol internally during the day.

July 13th. Much worse. Bowels very loose. Stop ichthyol.

CASE 6.—Albert M—, æt. 2 years. Eczema papulosum of four weeks' standing.

July 1, 1886. Ichthyol externally in 3 per cent. ointment ; internally 3 drops during the day.

July 6th. Somewhat better. Continue the ichthyol to the left leg and order the ointment of zinc oxide for the right.

July 10th. The left leg (ichthyol) much worse and inflamed ; the right leg much better. Stop the ichthyol.

CASE 7.—Louis B—, school boy, æt. 10. Eczema papulosum for two years.

November 6, 1886. Was ordered a 5 per cent. ichthyol ointment, which was continued up to

December 11th, and, as there was no improvement, it was then stopped.

CASE 8.—Jas. R—, peddler, æt. 32. Eczema vesiculosum upon a syphilitic base.

November 27, 1886. Was given a 5 per cent. ichthyol lotion in glycerine and water. This was used for one week without any improvement. Then a 3 per cent. ointment of the subiodide of bismuth was ordered, and he was well in one week.

CASE 9.—Michael R—, coal heaver, æt. 67. Eczema varicosum with ulcer.

November 27, 1886. Was ordered a $2\frac{1}{2}$ per cent. ichthyol lotion in glycerine and water.

December 14th. Great improvement. Continue treatment.

December 31st. Ulcer healed ; itching lessened ; skin red, thinner, dry and smooth.

January 27, 1887. Doing well. Was finally cured with a 25 per cent. ointment of cade.

CASE 10.—Leonard F—, conductor, æt. 25. Eczema madi-dans scroti of one month's duration.

February 23, 1887. After having greatly improved his con-

dition by the use of rubber, he was given a 2½ per cent. ichthyol ointment in Lassar's paste, with salicylic acid.

March 19th. The ointment stopped the itching until three days ago, after his ointment had been out one week. To test whether it was the ichthyol or the Lassar's paste that did the good, I now exhibited the drug in vaseline, preserving the strength 3 per cent.

March 22d. The ointment has converted a dry eczema into a raw and very itchy one. The ichthyol was stopped.

CASE 11.—G. P. M——, clerk, æt. 40. Eczema scroti.

December 18, 1886. Ichthyol, 2 per cent. in Lassar's paste.

February 12, 1887. Has been in comfortable condition until last week, when ointment ran out.

3. RECURRENT ERYTHEMA.

CASE 12.—Henry L——, conductor, æt. 21.

July 1, 1886. Ichthyol, 5 per cent. in water, and internally, three drops t. i. d.

July 27th. Has had several fresh outbreaks. Continue the treatment.

September 11th. A few fresh outbreaks. Continue the treatment.

October 16th. As there has been no improvement, the drug is stopped.

4. ACNE.

Four of these cases did not return after first visit, so we have only six cases for our statistics

CASE 13.—Gottlieb R——, scullion, æt. 29. Acne for nine months.

After having treated him for some time, and got his face into good condition, he had a fresh attack on July 18th.

July 20, 1886. Ichthyol soap. Internally, bromide of arsenic.

August 3d. Face looking nicely. Continue treatment.

August 14th. About the same.

August 24th. Face well.

CASE 14.—Pauline R——, cap maker, æt. 16. Acne vulgaris for one year.

July 15, 1886. Externally, 10 per cent. ichthyol ointment; internally, three drops ichthyol A. M. and P. M.

July 22d. Face worse. Continue treatment. Did not see her again.

CASE 15.—David L——, clerk, æt. 18. Acne vulgaris for three years.

December 23, 1886. Ichthyol soap, and internally, five drops A. M. and P. M.

January 18, 1887. Has continued treatment faithfully, but without any effect, so stop it.

CASE 16.—Henry N——, grocer, æt. 22. Acne for five years.

December 23, 1886. Ichthyol soap. Internally, rhubarb and soda.

January 11, 1887. Steady improvement.

CASE 17.—Jno. M——, printer, æt. 19. Acne for four weeks.

December 30, 1886. Ichthyol soap. Internally, tr. nux vom.

January 6, 1887. Face smooth. Continue treatment.

January 15, 1887. Relapse.

CASE 18.—Minnie N——, clerk, æt. 18. Acne indurata for one year.

March 22, 1887. Ichthyol, 30 per cent. in vaseline.

March 29, 1887. Has caused an artificial eczema, so stop it.

5. SYCOISIS.

CASE 19.—W. H. G——, tailor, æt. 54. Sycosis with relapses for many years.

June 29, 1886. Ichthyol, 10 per cent. in lard.

July 6, 1886. Began to grow worse on July 4th. An acute outbreak. Reduce strength of ointment to 3 per cent. and give three drops twice a day, internally.

July 10, 1886. A large number of new pustules. Stopped.

6. ULCERS.

Two of these cases did not return after first visit, so we have only three cases for study.

CASE 20.—Bridget S——, M., æt. 39. Varicose ulcer for three years.

November 30, 1886. Ichthyol, 3 per cent. in simple ointment.

January 6, 1887. Was continued up to this date. The condition being much worse, it was stopped.

CASE 21.—Carl S——, paints, æt. 45. Ulcers of some months' standing.

March 19, 1887. Ichthyol 3 per cent. in vaseline.

March 22d. More painful. Continue treatment.

CASE 22. Eliza W——, M., æt. 46. Varicose ulcer.

March 19, 1887. Ichthyol 3 per cent. in vaseline.

March 22d. Pained so that she could not stand it. Stop.

What story does the study of these cases tell us? One of almost absolutely negative results in regard to benefiting the cases. Yes; and worse; we find that the drug is irritating and aggravated many of the conditions present in the cases.

Let me summarize my results: Ichthyol, either in the form of the soap, the pure product, or the ammonia-sulphate was used in twenty-two cases of skin diseases, as follows:

DISEASE.	NUMBER OF CASES.	AV'G. TIME OF USING.	INTERNALLY. EXTERNALLY.	RESULTS AND REMARKS.
Rosacea	3	5 weeks.	Both.	1 case aggravated. No effect in 2 cases.
Eczema	8	5 "	4 cases, both. 4 " ext.	4 cases aggravated. 2 " no effect. 1 case greatly benefited. 1 " temporary benefit. It will be noticed that Case 11 was greatly benefited, but here the medicament was exhibited in Lassar's paste. Case 10 was also somewhat benefited when using a similar combination, but made worse when vaseline was substituted for the paste. Even in Case 9, which also was benefited, the oil of cade had to be resorted to to complete the cure.
Recurrent Erythema.	1	14 w'ks.	Both.	No improvement.
Acne.....	6	2½ "	2 cases, both. 4 " ext.	1 case cured, but bromide of arsenic was given by the mouth. 2 cases made worse. 1 case temporarily benefited. 1 " improved. 1 " no effect.
Sycosis.....	1	2 weeks.	Both.	Aggravated.
Ulcers.....	3	4 days.	Ext.	Aggravated.

11 cases made worse.

6 " no improvement.

1 case cured, arsenic being given at the same time.

4 cases improved, in two of which other well-known and tried remedies were used.

Well, I am sincerely sorry and greatly disappointed at the results I have obtained; because I had hoped to find a reliable remedy for the treatment of some of the most obstinate and disfiguring of skin diseases. But in the face of what I have seen my judgment must be: Ichthyol is an unreliable preparation when used alone; in some cases it is of apparent benefit when exhibited as an adjuvant; but it is not as good as many other old and well-approved remedies.

RESORCIN.

Let us now turn to the consideration of the second medicament chosen for our evening's study, namely: *Resorcin*, and

treat it in the same manner as we did ichthyol. The cases here detailed were, with one or two exceptions, all treated by me in Dr. Geo. H. Fox's service at the New York Skin and Cancer Hospital. As a number of the cases reported are examples of very rare forms of skin diseases, I would say that in all doubtful cases I have asked for and obtained Dr. Fox's opinion before entering the diagnosis on my notes. The drug was exhibited in vaseline, unless otherwise indicated, and in strengths running from five to fifty per cent.

I used the drug in nineteen cases, but was able to follow only fifteen of them, as follows: Eczema, 6 cases; epithelioma, 3 cases; tuberculosis cutis, 3 cases; lupus erythematosus, 1 case; lupus vulgaris, 1 case, and psoriasis, 1 case. In some of these cases other plans of treatment had been used before resorting to the resorcin, but in most of them resorcin was the first thing used. Internal treatment was given in only one of these cases; excepting something to relieve constipation or indigestion intercurrently arising in a few of them.

1. ECZEMA. (6 Cases.)

CASE 1.—Bridget H——, M., æt. 52. Eczema squamosum chronicum.

May 29, 1886. Resorcin 5 per cent. in ungt. zinc oxide.

June 10th. Much worse. Feet swollen so that she cannot walk. Stop it.

CASE 2.—Jas. McN——, laborer, æt. 39. Eczema squamosum of six years' standing. Varicose veins.

November 23d. Resorcin 12 per cent. in glycerine, applied with camel's hair brush twice a day.

December 2d. Leg itches a great deal more, and is raw and moist. Stop it.

CASE 3.—G. P. K——, clerk, æt. 40. Eczema madidans of genitals and anal region of three years' duration.

November 23, 1886. Resorcin 12 per cent. in glycerine as above.

December 18th. Anal region is somewhat improved. Genitals more raw and inflamed. Stop it.

CASE 4.—Jno. McC——, laborer, æt. 37. Eczema squamosum of crotch, of three months' duration.

April 16, 1886. Resorcin 2 per cent. in collodion.

April 21st. Skin paler and not itchy. Continue treatment.

May 13th. Looking nicely. Continue.

June 12th. Almost well. Continue. Did not see him again.

CASE 5.—Julius H——, school, æt. 14. Eczema squamosum capitis of seven months' duration.

December 4, 1886. Resorcin 3 per cent. in lanolin and olive oil.

December 9th. Great improvement. Continue.

January 6, 1887. Stop resorcin because after first benefit it seems to exert no further influence on the scalp.

CASE 6.—J. C. L——, engineer, æt. 34. Eczema squamosum of six years' duration.

November 29, 1886. Resorcin 12 per cent. in glycerine.

December 23d. Has proved very irritating and caused feet to swell. Stop it.

2. EPITHELIOMA. (3 Cases.)

CASE 7.—Eliza M——, M., æt. 49. A case of doubtful diagnosis. Apparently a fungating or warty growth developing upon old psoriatic patch. There is a large elevated patch upon the back which has many of the clinical features of epithelioma. To this pyrogallol and ammoniate of mercury were applied at different times for some weeks without much effect, and on

December 19, 1886. A 5 per cent. ointment of resorcin was ordered.

December 29th. Great improvement. Redness less, fungous granulations reduced. Continue treatment at 20 per cent. strength.

January 7, 1887. Patch on back quite flat and smooth, but a good deal of redness about it in adjacent skin. Stop resorcin and prescribe Lassar's paste with salicylic acid.

March 25th. Patch on back again raised and covered with yellowish crust. Renew resorcin.

April 1st. Doing well, though somewhat sore. Continue treatment.

April 3d. All flattened out. Continue treatment.

April 12th. Doing well.

April 22d. Acute attack of psoriasis over body.

May 13th. Patch smaller.

May 25th. Patch now smooth; only some redness at former site. After this the patient was not seen.

CASE 8.—Bridget R——, housewife, æt. 58. Epithelioma of face, of four years' duration.

August 17, 1886. Resorcin, 50 per cent. ointment. This was continued constantly until

November 4th. Ulcer apparently entirely healed.

December 21st. Middle or old part of ulcer covered with firm cicatrix. Some small ulcerating points about the edge, which are bored out with nitrate of silver.

CASE 9.—John L—, carpenter, æt. 44. Epitheliomatous ulcer of seven years' duration.

September 16th. Resorcin, 50 per cent. ointment.

September 18th. Doing well. Continue treatment. He was then lost sight of.

3. TUBERCULOSIS CUTIS, OR SCROFULODERMA. (3 Cases.)

CASE 10.—Ann B—, housewife, æt. 66. Chronic ulceration of finger of twenty years' duration.

February 9, 1886. Resorcin, 20 per cent. ointment.

February 16th. Better. Continue treatment.

February 23d. Better. Burns a little. Continue.

March 16th. Soreness gone. Ulcer nearly healed. (This was subsequently completely cured with mercurial plaster.)

CASE 11.—Mrs. M—, housewife, æt. 62. Tuberculosis cutis of back of hand, index and middle finger, for one and one-half years. Skin dark red, with tendency to ulceration at various points, and to creep along back of hand.

February 2, 1886. After having used a bichloride of mercury ointment for two months without any benefit, she was given a resorcin ointment of 20 per cent. strength.

February 23d. Skin red and scaly. Continue treatment.

March 23d.—Disease spreading down the back of the hand, which is sore and painful. Stop the resorcin and give mercurial plaster.

April 8th. Better in upper part; worse in lower part. Resorcin, 10 per cent. in collodion.

April 15th. Much irritated. Hand swollen. Stop resorcin and use ungt. zinc oxide.

April 20th. Upper part is well. Continue u. z. o.

April 27th. Skin full of purulent matter underneath. Itches a good deal. Resorcin, 5 per cent. in simple ointment.

April 29th. Decidedly better. Inflammatory symptoms ceased. Continue treatment.

August 12th. Now most of the patch is well, and the skin sound.

Incidentally, I would say that the daughter of this patient applied the resorcin-collodion preparation to her corns upon her

own responsibility, and cured them. May be in resorcin we have a new corn remedy.

CASE 12.—Nathan W—, æt. 6.

Verrucous scrofulodermata upon left leg, of six months' standing.

After removing crusts with a poultice, on

July 6, 1886, a 10 per cent. ointment of resorcin in agnine was ordered for local use, and arsenic and iron given by the mouth.

September 11th. Majority of patches well. No verrucæ except on lower part of patch on back of leg. Continue treatment.

September 28th. All well excepting one patch over calf, where there is some pustulation. Stop resorcin and order ungt. zinc oxid.

October 7th. All smooth, and only some discoloration. He was not seen again until

March 24, 1887, when he came back with a slight relapse in patch over calf. The other old patches have their location marked by delicate cicatricial tissue, which is dotted like a vaccination scar.

4. LUPUS ERYTHEMATOSUS.

CASE 13.—T. C—, brakeman, æt. 41. Lupus erythematosus of ten years' duration, with nodules with central depression, apparently located about the sebaceous glands of nose.

January 9, 1885. Resorcin, 20 per cent. Internally, phosphorus.

January 19th. Great improvement. Nodules have all flattened out. Has never been so well since disease first appeared.

January 30th. Only slight redness and scaling. Stop resorcin and give zinc oxide ointment.

February 2d. No scaling. Slight redness. Order Hydrarg. ammon, 20 grains, in ungt. ox. zinc, one ounce.

March 20th. Has had a few nodules appear since he was last seen, which disappeared promptly under resorcin.

5. LUPUS VULGARIS.

CASE 14.—Eliza G—, M., æt. 36. Lupus non-exedens for thirty-four years.

In this case the bichloride of mercury ointment was used for several months without the least effect.

April 1, 1886. Resorcin, 25 per cent. ointment.

April 27th. Doing well. Patch with more cicatricial tissue through it. Resorcin picks out diseased points and leaves sound and cicatricial parts unaffected.

May 29th. Perpendicular diameter of both ends of patch reduced two mm. Continue treatment.

September 14th. Steady, but slow improvement. Stop resorcin to begin electrolysis on patch.

6. PSORIASIS.

CASE 15.—Jno. H——, driver, æt. 40. Psoriasis for four years.

May 8, 1886. Resorcin 5 per cent. ointment.

May 11th. Has cleaned up patches, removing the scales. Continue treatment.

August 31st. Up to date has had no further influence, so stop it.

Summary: Resorcin was used in fifteen cases of skin diseases, as follows:

DISEASE.	NUMBER OF CASES.	AV'G TIME OF USING DRUG.	RESULTS AND REMARKS.
Eczema....	6	27 Days	3 Cases aggravated, 2 cases improved, 1 case cured.
Epithelioma	3	4½ Months..	All greatly improved, two of them having been caused to heal up completely, although one had a relapse at edges of patch.
Tuberculosis or Scrofuloderma..	3	3½ Months..	All greatly improved, and one cured, iron and arsenic being used internally.
Lupus Erythem.....	1	2 Months....	Remarkable improvement, causing prompt disappearance of inflammatory symptoms.
Lupus Vulgaris.....	1	5½ Months..	Improved; size of patch lessened.
Psoriasis....	1	3½ Months..	Slight improvement at first; afterwards no effect.

3 Cases made worse,

10 " improved.

2 " cured.

Considering the very intractable nature of most of the cases in which resorcin was used, the results obtained seem to me eminently satisfactory, and I feel justified in making the following

Conclusions: Resorcin is an irritating substance for use in eczema, though at times it may prove very efficient in chronic cases where active stimulation is indicated. It exerts a powerful absorptive effect on new cell infiltrations. It is a useful addition to our list of remedies for the treatment of epitheliomatous lesions where surgical procedures are contra-indicated from any cause.

